

Sim, Lowman, Ashton & McKay LLP
Barristers & Solicitors

Sim & McBurney
Patent & Trade Mark Agents

6th Floor, 330 University Avenue
Toronto, Ontario, Canada M5G 1R7

RECEIVED
CENTRAL FAX CENTER

Tel. (416) 595-1155 • Fax (416) 595-1163

DEC 10 2007

DATE: December 10, 2007

Application No: 09/857,305

Our Ref: 1038-1153 MIS:jb

| TO: | FAX # | PHONE # |
|--|----------------|---------|
| US Patent and Trademarks Office Mail Stop AE | (571) 273-8300 | |

Total Number of Pages (Including This Page): 4

FROM: Michael I. Stewart / 416-849-8400

COMMENTS:

We are transmitting from a Xerox Telecopier 7033, 7020 or Workcentre Pro 745 – Group 3 which are compatible with Groups 1 and 2 and fully automatic on a 24 hour basis. If any part of this message is received poorly or missing please call the telecopier operator immediately at (416) 595-1155.

Confidentiality Notice

This message is intended only for the use of the individual person or entity to which it is addressed and may contain information that is privileged and confidential. If the reader of this message is not the intended recipient or the agent responsible for delivering the message to the intended recipient, you are hereby notified that any disclosing, copying, distributing or the taking of any action in reliance on the contents of this communication is prohibited. If you have received this communication in error, please notify us immediately by telephone (call collect) and return the original message to us at the above address via the postal service. Thank you.

**RECEIVED
CENTRAL FAX CENTER**

Dec-10-07 03:18pm From-SIMBAS

T-362 P.002/004 F-545

DEC 10 2007

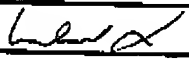
PTO/SB/21 (10-07)

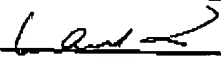
Approved for use through 10/31/2007. OMB 0851-0031
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

| | | |
|--|----------------------|--|
| TRANSMITTAL FORM | Application Number | 09/857,305 |
| | Filing Date | October 3, 2001 |
| | First Named Inventor | Robert C. Brunham |
| | Art Unit | 1845 |
| | Examiner Name | Nita M. Minnifield |
| (to be used for all correspondence after initial filing) | | |
| Total Number of Pages in This Submission | 3 | Attorney Docket Number 1038-1163 MIS:jb |

| ENCLOSURES (Check all that apply) | | |
|--|--|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|---|----------|--------|
| Firm Name | Sim & McBurney | | |
| Signature |  | | |
| Printed name | Michael I. Stewart | | |
| Date | December 10, 2007 | Reg. No. | 24,873 |

| CERTIFICATE OF TRANSMISSION/MAILING | | | |
|---|---|------|-------------------|
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: | | | |
| Signature |  | | |
| Typed or printed name | Michael I. Stewart | Date | December 10, 2007 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**RECEIVED
CENTRAL FAX CENTER**

T-362 P.003/004 F-545

DEC 10 2007

PTO/SB/22 (10-07)

Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.
 Approved for use through 10/31/2007. OMB 0851-0031
 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

| | | | |
|--|---------------------|------------------------------------|-------------|
| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | Docket Number (Optional) | |
| FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | 1038-1153 MIS | |
| Application Number 09/857,305 | | Filed October 3, 2001 | |
| For Two-Step Immunization Procedure Against Chlamydia Infection | | | |
| Art Unit 1645 | | Examiner Nita M. Minnifield | |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | Fee \$120 | Small Entity Fee \$60 | \$ _____ |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$460 | \$230 | \$ _____ |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1050 | \$525 | \$ _____ |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1640 | \$820 | \$ _____ |
| <input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2230 | \$1115 | \$ 2,230.00 |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. | | | |
| <input type="checkbox"/> A check in the amount of the fee is enclosed. | | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | | |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 192253. I have enclosed a duplicate copy of this sheet. | | | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | |
| I am the <input type="checkbox"/> applicant/inventor. | | | |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). | | | |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number 24,973 | | | |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____ | | | |
| _____ Signature | | December 10, 2007 Date | |
| Michael I. Stewart Typed or printed name | | (416) 849-8400 Telephone Number | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | |
| <input checked="" type="checkbox"/> Total of One (1) forms are submitted. | | | |

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.